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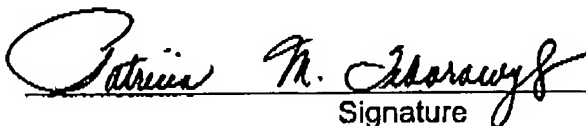
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- ISSUE FEE PAYMENT (PTOL-85), in duplicate.

CUSTOMER NO.: 24498  
Serial No.: 10/511,560  
Docket No.: PU020131  
Art Unit: 2144  
Examiner: Thanh T. Nguyen

TOTAL NUMBER OF PAGES INCLUDING THIS SHEET: 9

This collection of information is required by 37 CFR 1.8. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1.8 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

for FY 2007

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) \$3360.00

Complete if Known

Application Number 10/511,560  
Filing Date October 15, 2004  
First Named Inventor Keith Robert Broerman  
Examiner Name Thanh T. Nguyen  
Art Unit 2144  
Attorney Docket No. PU020131

METHOD OF PAYMENT (check all that apply) CUSTOMER NUMBER: 24498

☐ Check ☐ Credit card ☐ Money Order☐ None ☐ Other (please identify):☒ Deposit Account: Deposit Account Number 07-0832

Deposit Account Name: THOMSON LICENSING LLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17☒ Credit any overpayments

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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

## 2. EXCESS CLAIM FEES

## Fee Description

Each claim over 20 (including Reissues)

Small Entity Fee (\$)

Fee (\$)

Each independent claim over 3 (including Reissues)

Fee (\$)

Fee (\$)

Multiple dependent claims

Multiple Dependent Claims

Total Claims Extra Claims Fee (\$)

- 20 or HP = x =

Fee (\$)

Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20.

Independent Claims Extra Claims Fee (\$)

- 3 or HP = x =

HP = highest number of independent claims paid for, if greater than 3.

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(e).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)

- 100 = / 50 = (round up to a whole number) x =

## 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): FEE FOR PETITION TO REVIVE UNINTENTIONAL: \$1620.00

ISSUE FEE PAYMENT: \$1740.00

Fees Paid (\$)

\$3360.00

## SUBMITTED BY

Name (Print/Type)

GUY H. ERIKSEN

Registration No.  
(Attorney/Agent)

41,736

Telephone

(609) 734-6807

Signature

February 24, 2009

This collection of information is required by 37 CFR 1.130. The information is required to obtain or retain a benefit by the patent which is to be filed with the USPTO to process an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 10 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1460, Alexandria, VA 22315-1460. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22315-1460. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# **FEE TRANSMITTAL** for FY 2007

☐ Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT (\$)** **\$3360.00**

## **Complete if Known**

Application Number **10/511,560**  
Filing Date **October 15, 2004**  
First Named Inventor **Keith Robert Broerman**  
Examiner Name **Thanh T. Nguyen**  
Art Unit **2144**  
Attorney Docket No. **PU020131**

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**CUSTOMER NUMBER: 24498**

☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify):

☒ Deposit Account: Deposit Account Number **07-0832**

Deposit Account Name: **THOMSON LICENSING LLC**

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☒ Charge any additional fee(s) or underpayments of

☒ Credit any overpayments

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**FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)**

### **1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

### **2. EXCESS CLAIM FEES**

#### **Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

**Total Claims** **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

- 20 or HP =  $\frac{\text{Total Claims} - 20}{\text{HP} - 20} \times \text{Fee}$

HP = highest number of total claims paid for, if greater than 20.

**Independent Claims** **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

- 3 or HP =  $\frac{\text{Independent Claims} - 3}{\text{HP} - 3} \times \text{Fee}$

HP = highest number of independent claims paid for, if greater than 3.

### **3. APPLICATION SIZE FEE**

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**Total Sheets** **Extra Sheets** **Number of each additional 50 or fraction thereof** **Fee (\$)** **Fee Paid (\$)**

- 100 =  $\frac{\text{Total Sheets} - 100}{50}$  (round up to a whole number) x Fee

### **4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

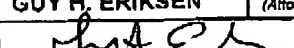
Other (e.g., late filing surcharge): **FEE FOR PETITION TO REVIVE UNINTENTIONAL: \$1620.00**

**ISSUE FEE PAYMENT: \$1740.00**

**Fees Paid (\$)**

**\$3360.00**

### **SUBMITTED BY**

Name (Print/Type) **GUY H. ERIKSEN** Registration No. (Attorney/Agent) **41,736** Telephone **(609) 734-6807**  
Signature  February 24, 2009

This collection of information is required by 37 CFR 1.129. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 121 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount or time you require to complete the form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.